Madison County Building Department

Residential

Building Permit Application

Date: _____/____/_____

Owner: _____ _____ _____
First Middle Last

Address: _____ _____ _____ _____
Street / P.O. Box City State Zip Code

Phone No.:_____ _____ _____ Mobile: _____ _____ _____

Address of Construction Site: _____

Parcel ID Number: _____ _____ _____ _____ _____ _____

Nature of Work: _____

Land Use / Zoning Compliance: _____ FEMA Map/Zone: _____

Utility company: ____ Progress Energy ____ Tri Co. Elec. Co-op. Other _____

Contractor: _____ License No. _____

Address: _____ _____ _____
Street City State

Phone No. : _____ _____ _____ Mobile: _____ _____ _____

Agent/ Dealer _____

Address _____ _____ _____
Street City State

____ New Construction _____ Addition _____ Remodel/Renovation _____ Repair work

Heated Space _____ *Unheated Space* _____

For Addition and New Construction projects please provide the following:

____ Two Sets of Plans (2) ____ Site Plan (2) ____ Truss Layout (2)

____ Copy of Warranty Deed ____ Wind Load Analysis (2) ____ Septic Permit

____ Florida Energy Form (2) ____ Notice of Commencement ____ Driveway permit

____ Zoning Compliance Form

(If indicated provide 2 copies, one will be returned with building permit showing any required corrections.)

Notations: _____

Date

/ /

wob-2/25/06
wob-08/04/06 (2nd)
wob-8/15/06 (3rd)